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From : Richard San Pietro

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Date : 12/11/03

App. Serial Number : 09/982,658

Client/Matter No : 074022-2305

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Transmitted herewith for filing is a Request for Continued Examination. Thank you.

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Atty. Dkt. No. 074022-2305

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DEC 11 2003

Applicant: NYGREN et al.
Title: DEVICES AND METHODS
FOR OPTICAL DETECTION
OF NUCLEIC ACID
HYBRIDIZATION
Appl. No.: 09/982,658
Appl. Filing Date: 10/18/2001
Examiner: Carla J. Myers
Art Unit: 1634

CERTIFICATE OF FACSIMILE TRANSMISSION I hereby certify that this paper is being facsimile transmitted to the United States Patent and Trademark Office, Alexandria, Virginia on the date below. (703.872.9307) Line Gauthier (Printed Name) <i>Line Gauthier</i> (Signature) December 11, 2003 (Date of Deposit)
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REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

1. Submission required under 37 C.F.R. §1.114:

Enclosed is an Amendment/Reply.

Atty. Dkt. No. 074022-2305

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$770.00	= \$770.00
Total Claims:	14	- 20	= 0	x \$18.00	= \$0.00
Independents	1	- 3	= 0	x \$86.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$0.00	= \$0.00
CLAIMS FEE TOTAL:					= \$770.00

[X] Please charge Deposit Account No. 50-0872 in the amount of \$770.00. A duplicate copy of this transmittal is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date Dec. 11, 2003

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By Richard San Pietro

Richard San Pietro
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